



Rod R. Blagojevich, Governor
Barry S. Maram, Director

Illinois Department of Public Aid

201 South Grand Avenue East
Springfield, Illinois 62763-0001

Telephone: (217) 524-7244
TTY: (800) 526-5812

September 19, 2003

INFORMATIONAL NOTICE

TO: Long Term Care Providers

RE: Procedures for the Administration of Influenza Vaccine Pneumococcal Vaccine

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In recognition that residents in long term care facilities are considered to be high risk because of their age, health problems and living arrangements, the Department will again provide influenza vaccine (2003-2004 formula, current strain). The Department of Public Health requires that long term care facilities secure physician's orders for the administration of the vaccine. In reviewing the health care needs of a long term care resident, the attending physician may decide that pneumococcal vaccine is indicated in addition to the influenza vaccine. The pneumococcal vaccine is available from and should be billed by the supplying pharmacy.

For convenience in administering the influenza vaccine, disposable syringes and needles will be included in the vaccine shipment. Based on the number of Medical Assistance clients in your facility, necessary quantities of the vaccine will be shipped, via United Parcel Service, beginning in October, to each participating long term care facility for administration by facility staff. **Upon receipt of the shipment of the vaccine, refrigeration is necessary to insure its stability.**

To ensure compliance with federal rules that require the Department to claim federal funding for only vaccine administered to Medicaid residents, a monitoring process will be continued this year. Specific procedures to document who receives the vaccine, along with your facility resident administration log, will again be included with the vaccine shipment. Attached is an example of the resident administration log. The log you will receive with your vaccine will reflect your facility name, provider number and each Medicaid resident's name and recipient identification number (RIN) within your facility. Providers must ensure that the procedures are followed and can be verified by BLTC field staff performing a post administration review.

Should there be any vaccine remaining after being administered to all current Medicaid residents on the log and those recently transitioned to Medicaid but not on the log, it may be retained by the facility and administered to other residents needing it as the Department encourages immunization of all residents. For any residents who receive the vaccine whose names must be added to the log, the facility must make it clear in the RIN field that the resident is Medicaid eligible (insert RIN in RIN field), Medicaid pending or not Medicaid.

Your cooperation in making this cost-effective, preventive care available to long term care residents is appreciated.

Questions should be directed to the Bureau of Long Term Care at 217-782-0545.

Anne Marie Murphy, Ph.D.
Administrator
Division of Medical Programs

Region: XX, Regional Supervisor's Name

Facility: Your Nursing Home
ID: 000000000012

**Illinois Department of Public Aid
Bureau of Long Term Care**

Additional Residents not Listed on the Medicaid Resident Vaccine Administrative Record

[illegible]

Region: XX, Regional Supervisor's Name

Facility: Your Nursing Home
ID: 000000000012

Illinois Department of Public Aid
Bureau of Long Term Care
Medicaid Resident Vaccine Administrative Record

Last	First	RIN	Date	Initials
Doe	Jane01	345678912	___/___/ 2003	_____
Doe	Jane03	456789123	___/___/ 2003	_____
Doe	Jane04	567891234	___/___/ 2003	_____
Doe	Jane05	678912345	___/___/ 2003	_____
Doe	Jane06	789123456	___/___/ 2003	_____
Doe	<div>SAMPLE</div>			
Doe				
Doe				
Doe				
Doe				
Doe	Jane12	512346789	___/___/ 2003	_____
Doe	Jane13	612345789	___/___/ 2003	_____
Doe	John01	123456789	___/___/ 2003	_____
Doe	John02	234567891	___/___/ 2003	_____
Doe	John03	912345678	___/___/ 2003	_____
Doe	John04	112345678	___/___/ 2003	_____
Doe	John05	223456789	___/___/ 2003	_____
Doe	John14	712345689	___/___/ 2003	_____
Doe	John15	812345679	___/___/ 2003	_____

Number of Residents in your nursing home: 19

I, _____, representing said facility, hereby certify the 2003-2004 shipment of influenza vaccine, provided by the Illinois Department of Public Aid, has been administered to the Medicaid eligible residents listed in this document.

Administrator

Date